



Program Integrity Updates

October 26 & 27, 2022



Health & Human Services

Housekeeping

A few things to keep in mind

- Please use the message function to put in questions and comments
- Both the slide show and any Q&A will be saved to our website
- If you think of questions after the update, please email the audit inbox at auditresponse@nd.gov.
- No specific cases or situations will be addressed in the Provider Update

Fraud, Waste & Abuse

Civil Monetary Penalties Law (CMP)

42 U.S.C § 1320a-7a

The Office of Inspector General (OIG) has the authority to seek civil monetary penalties (CMPs), assessments, and exclusion against an individual or entity based on a wide variety of prohibited conduct and is authorized to seek different amounts of penalties and assessments based on the type of violation at issue.

In each CMP case resolved through a settlement agreement, the settling party has contested the OIG's allegations and denied any liability. OIG may seek civil monetary penalties and sometimes exclusion for a wide variety of conduct.

Civil Monetary Penalties Law (CMP)

Common Examples:

False and Fraudulent Claims

- The OIG may seek a CMP or exclusion against individuals or entities that present claims to Federal health care programs that the individual or entity knows (or should know) are for an item or service that was not provided as claimed or is false or fraudulent.
- The OIG may seek a CMP or exclusion against an individual or entity who makes claims for a service that is not actually provided, is provided but is already covered under another claim, is not properly coded, or is not supported by the medical record.

Civil Monetary Penalties Law (CMP)

Drug Price Reporting

- The Medicaid Drug Rebate Program requires drug manufacturers to submit pricing information to HHS and to pay a rebate to the state Medicaid programs for each unit of the covered drug that the state Medicaid programs reimburse.
- Manufacturers with Medicaid Drug Rebate agreements are also required to report price information that is used to set Average Sales Price, the reimbursement metric for drugs covered by the Medicare Part B program.
- Given the importance of timely and accurate submission of pricing information, OIG may seek a CMP against drug manufacturers that fail to properly report the required information.

Civil Monetary Penalties Law (CMP)

Physician Self-Referral

- The Physician Self-Referral Statute, or Stark law, prohibits individuals or entities from referring Medicare or Medicaid patients for designated health services to entities with which individuals or entities have a direct or indirect financial relationship, unless an exception applies.
- The OIG may seek a CMP or exclusion against individuals or entities that present a claim that the individual or entity knows or should know, is for a service for which payment may not be made under the Stark law.

Civil Monetary Penalties Law (CMP)

Kickback

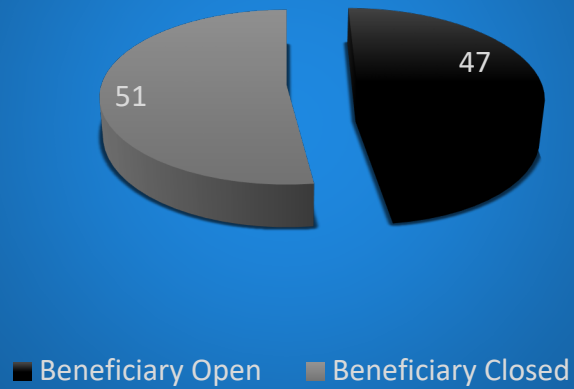
- The Anti-Kickback Statute prohibits individuals or entities from asking for or receiving any remuneration in exchange for referrals of Federal health care program business.
- The OIG may seek a CMP or exclusion against individuals or entities who knowingly and willfully: (1) offer or pay remuneration, directly or indirectly, to induce referrals of Federal health care program business; or (2) solicit or receive remuneration, directly or indirectly, in return for referrals of Federal health care program business.

Fraud Referrals

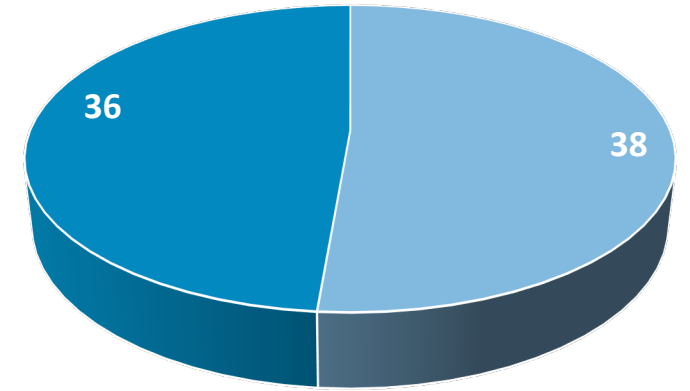
Beneficiary Cases

- Recoveries \$14,716.51

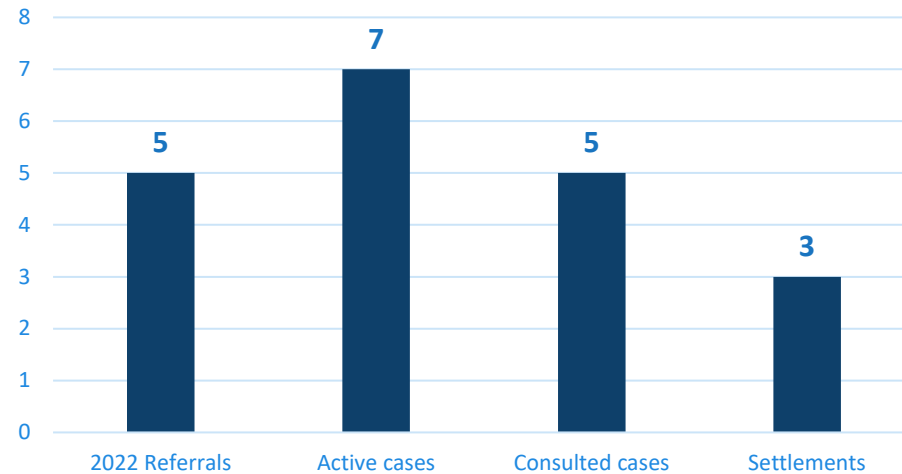
2022 Beneficiary Cases



Provider Cases



MFCU Cases



- Program Integrity Recoveries - \$82,676.96
- MFCU Settlements - \$530,904.95

Provider Enrollment

Provider Enrollment Updates

- Noridian processing times have improved
- Timely filing and new provider applications
- All enrolled providers are required to enroll in Electronic Funds Transfer (EFT). If you are not enrolled with EFT by the end of the year, your payments will suspend until you are enrolled. Do not wait until the end of the year to enroll, there will likely be delays in processing the requests.

Provider Enrollment Updates (con't)

Provider enrollment and revalidation forms and current status

[Medicaid Provider Enrollment Information | Health and Human Services North Dakota](#)

Noridian Healthcare Solutions

Attn: ND Medicaid Provider Enrollment

PO Box 6055

Fargo, ND 58108-6055

Phone: (701) 277-6999

Fax: (701) 433-5956

Email: NDMedicaidEnrollment@noridian.com

Surveillance, Utilization and Review Section (SURS)



Health & Human Services

Agenda Added to Previous Provider Updates

Agendas for each meeting can be found at

[Medicaid Provider Education and Training | Health and Human Services North Dakota](#)

The agenda is posted to support the audio recordings that get posted. The topics listed are associated with each audio recording so if a provider wants to watch a specific topic, they can refer to the agenda and go to that audio recording instead of listening to each audio recording.

General Information for Providers Manual

Providers should carefully review the following chapters for substantive updates:

- Provider Enrollment – page 10
- Medicaid Covered Services – page 21
- Health Tracks (EPSDT) – page 57
- Hospital Services – page 71
- Medical Nutrition Therapy - 92

NDHHS Website

The DHHS website can be found at [Home | Health and Human Services North Dakota](#)

The Medicaid providers site is found at [Medicaid Provider Information | Health and Human Services North Dakota](#)

Payment Error Rate Measurement

The formal Payment Error Rate Measurement (PERM) process is complete. What happens now?

The Program Integrity Unit (PIU) has begun the audit process for those providers who had findings based on the PERM audit. The state will recoup funds based on PERM findings and audit built around the PERM findings. Provider errors:

1. Did not respond to PERM requests for documentation.
2. Did respond initially but did not respond to extra requests for documentation.
3. Had various issues relating to signatures, documentation and a lack of policy adherence.

Payment Error Rate Measurement Post Audit Letter

Date X, 2022

Provider Medicaid #: XXXXXX

Facility Name

5555 Anytown Drive

Magical, ND 58888

contactperson@nd.org

Claim ICN Number: XXXXXXXXXXXX

PERM ID: NDXXXXXX

Total Dollars in Error: \$000.00

Claim Date of Service: Month Date, Year

PERM Error Code and Reason:

MR1 - No Documentation Error based on provider not supplying information requested for PERM review. The provider did respond with a statement that the beneficiary was not seen on the sampled DOS.

Provider Reminders

VERIFICATION OF MEMBER ELIGIBILITY

- It is the responsibility of the rendering provider to verify a member's Medicaid eligibility status and Primary Care Case Management (PCCM) enrollment prior to providing services to the member. If the member is enrolled in PCCM, the rendering provider must assure referrals from the member's designated PCP are in place for any services received by the member in order to receive consideration of payment by ND. (Page 18 of the General Information for Providers Manual)

Provider Reminders (con't)

Overpayment

- The provider agrees that in any event it receives payment for services or goods in an amount in excess of payment permitted by the Department, that such overpayments may be deducted from future payments otherwise payable to the provider. The provider acknowledges that such remedy is not the only or exclusive remedy available to the Department. (Item 7 in the SFN 615 Provider Agreement)

NDHHS Logo

NORTH
Dakota
Be Legendary.

Health & Human Services

988 Number

- 988 is a new three-digit emergency number for behavioral health crises that officially launched on July 16, 2022, and is accessible 24/7, anywhere in the United States. Over time, the vision for 988 is to have additional crisis services available in communities across the nation, much the way emergency medical services work. In North Dakota the state is still rolling out areas of accessibility and working towards statewide coverage as quickly as possible.
- <https://www.behavioralhealth.nd.gov/988/about>
- If you have questions or need more information, please reach out to James Knopik
- (701) 328 - 8988
- jknopik@nd.gov

Current Audits

- NEMT
- Physical Therapy and Physical Therapy Assistant
- Chiropractic
- DME
- Emergency Department
- Dental
- Dermatology Unbundling
- 3 Day Window between Outpatient Services and admission

Contact Information



Communications

Provider/stakeholder email list

<http://www.nd.gov/dhs/services/medicalserv/medicaid/provider.html> (very top of the page).

Provider update page

[Medicaid Provider Updates | Health and Human Services North Dakota](#)

MMIS provider message center: Once you have logged in to MMIS you should see your messages pop up. The messages might be an update, a revalidation that is due, etc. Please make sure to read the messages.

Please encourage your partners and contacts to subscribe to our emails and view provider news and information and MMIS messages for updates.

Program Integrity Team Contact Information

Dawn Mock – Medicaid Program Integrity Administrator

Phone: (701) 328 – 1895 Email: dmock@nd.gov

Steven McNichols – Medicaid Audit Coordinator

Phone: (701) 328 – 4831 Email: smcnichols@nd.gov

Denise Martino - Fraud Waste & Abuse/Managed Care Oversight Administrator

Phone: (701) 328 – 4024 Email: dmmartino@nd.gov

Program Integrity Team Contact Information (con't)

Gale Schuchard – Compliance Technician

Phone: (701) 328 – 2334 Email: gjschuchard@nd.gov

Missy Rosales – SURS Analyst

Phone: (701) 328 – 3507 Email: melrosales@nd.gov

Sarah Schaaf – FWA Analyst

Phone: (701) 328 – 4682 Email: slschaaf@nd.gov

Program Integrity Contact Information – Fraud, Waste and Abuse

General fraud email: medicaidfraud@nd.gov

Phone number: 1-701-328-4024 OR 1-800-755-2604 – select option 3 to report Medicaid fraud

Suspected fraud form (SFN 20) submission link:

<https://apps.nd.gov/itd/recmgmt/rm/stFrm/eforms/Doc/sfn00020.pdf>

Program Integrity Contact Information – Provider Enrollment

General provider enrollment email: NDMedicaidEnrollment@Noridian.com

Program Integrity contact information – Provider audit

General audit email: auditresponse@nd.gov

Closing

Future Dates

February 2023: the 22nd at 1:30 - 2:30 PM and the 23rd at 8:30-9:30 AM

2023 dates

- June 28 from 1:30 to 2:30
- June 29 from 8:30 to 9:30
- October 25 from 1:30 to 2:30
- October 26 from 8:30 to 9:30

As we close...

- Electronic Visit Verification (EVV)
- Questions
- Comments
- Ideas for potential future topics